

PATENT APPLICATION FEE DETERMINATION RECORD
Effective October 1, 2003

Application or Docket Number

10/763068

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

TOTAL CLAIMS	108	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	108 minus 20 =	88
INDEPENDENT CLAIMS	16 minus 3 =	13
MULTIPLE DEPENDENT CLAIM PRESENT		<input type="checkbox"/>

* If the difference in column 1 is less than zero; enter "0" in column 2

SMALL ENTITY
TYPE OR OTHER THAN
SMALL ENTITY

RATE	FEES	RATE	FEES
BASIC FEE	385.00	OR BASIC FEE	770.00
XS 9=	792	OR XS18=	
X43=	559	OR X86=	
+145=	8	OR +290=	
TOTAL	1736	OR TOTAL	

8/23/06 CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	107	Minus	108	=
Independent	16	Minus	76	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

1. 18. 33. 42. 45. 49. 51. 53. 54. 58. 59.
69. 79. 82. 83. 96.

SMALL ENTITY OR OTHER THAN
SMALL ENTITY

| RATE | ADDITIONAL FEE | RATE | ADDITIONAL FEE |
|------------------|----------------|---------------------|----------------|
| XS 9= | | OR X\$18= | |
| X43= | | OR X86= | |
| +145= | | OR +290= | |
| TOTAL ADDIT. FEE | | OR TOTAL ADDIT. FEE | |

| AMENDMENT B | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|---|----------------------------------|-------|------------------------------------|---------------|
| Total | SAME | Minus | = | = |
| Independent | | Minus | = | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | | |

| RATE | ADDITIONAL FEE | RATE | ADDITIONAL FEE |
|------------------|----------------|---------------------|----------------|
| X\$ 9= | | OR X\$18= | |
| X43= | | OR X86= | |
| +145= | | OR +290= | |
| TOTAL ADDIT. FEE | | OR TOTAL ADDIT. FEE | |

| AMENDMENT C | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|---|----------------------------------|-------|------------------------------------|---------------|
| Total | | Minus | = | = |
| Independent | | Minus | = | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | | |

| RATE | ADDITIONAL FEE | RATE | ADDITIONAL FEE |
|------------------|----------------|---------------------|----------------|
| X\$ 9= | | OR X\$18= | |
| X43= | | OR X86= | |
| +145= | | OR +290= | |
| TOTAL ADDIT. FEE | | OR TOTAL ADDIT. FEE | |

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.